

# CARLYLE PARKS & RECREATION DEPARTMENT

Employment Application



## APPLICANT INFORMATION

Last Name				First Name			M.I.		
Street Address						Apartment/Unit #			
City				State			ZIP		
Birth Date				E-mail Address					
Social Security No.				Cell Phone			Can you receive text messaging?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Date Available			List any dates between May – Sept in which you will be unable to work						
Have you ever worked for the Parks Dept?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?						
What position did you previously work?									

## POSITION DESIRED

*Please Check All Positions Interested In*

<input type="checkbox"/>	<b>Lifeguard</b> (MUST be 16 years old)		
<input type="checkbox"/>	<b>Camp Coordinator</b> (MUST be 18 years old with a High School Diploma)		
<input type="checkbox"/>	<b>Recreation Attendant –</b> Scorekeeper, Camp/Program Support, etc.		
<input type="checkbox"/>	<b>Maintenance Worker</b> (MUST be 16 years old)		
<input type="checkbox"/>	<b>Umpire or Referee</b>		
<b>Sports:</b>	Baseball & Softball <input type="checkbox"/>	Basketball <input type="checkbox"/>	Soccer <input type="checkbox"/>

## EDUCATION

High School				Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
College				Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				

## REFERENCES

*Please list two professional references.*

Full Name				Relationship					
Company				Phone					
Address									
Full Name				Relationship					
Company				Phone					
Address									

## DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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